

*This portion MUST be returned with your payment to ensure proper credit. THANK YOU*

*f*

ACCOUNT BILLED
CHEMICAL LIME COMPANY

PROJECT NAME
MARBLEHEAD MTN. PROCESSING PLT

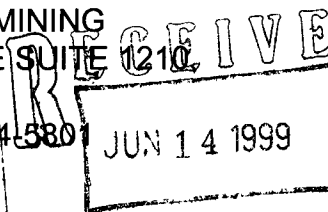
PROJECT ID
M450024

DUE DATE	ANNUAL FEE	PAST DUE	AMOUNT DUE	<input type="checkbox"/> FEE NOT ENCLOSED
7/30/1999	\$ 750	\$ 0	\$ 750	Permittee requests an inspection to close out this permit.

TAX ID OR SOCIAL SECURITY #

Change of Address	
Contact	_____
Address	_____ _____ _____
State	Zip
Phone	_____

DIVISION OF OIL GAS AND MINING  
1594 WEST NORTH TEMPLE SUITE 1210  
PO BOX 145801  
SALT LAKE CITY UT 84114-5801



*Please make check payable to:*  
**DIV. OF OIL, GAS & MINING** **Division of Oil, Gas and Mining**